



Health Services
LOS ANGELES COUNTY

Los Angeles County
Board of Supervisors

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Fifth District

Date May 23, 2006

TO: Each Supervisor

FROM: Carol Meyer
Director
Emergency Medical Services Agency

P. Michael Freeman
Fire Chief
Los Angeles County Fire Department

**SUBJECT: MUTUAL AID PLAN REQUIRED FOR
IMPLEMENTATION OF THE 9-1-1 EMERGENCY
AMBULANCE TRANSPORTATION AGREEMENTS**

Bruce A. Chernof, MD
Acting Director and Chief Medical Officer

John R. Cochran III
Chief Deputy Director

William Loos, MD
Acting Senior Medical Officer

On March 14, 2006, your Board approved new 9-1-1 emergency ambulance transportation agreements subject to the proposed contractor's agreement to a mutual aid plan jointly developed by the Department of Health Services Emergency Medical Services (EMS) Agency and the Fire Department (LACoFD).

313 N. Figueroa Street, Suite 912
Los Angeles, CA 90012

Tel: (213) 240-8101
Fax: (213) 481-0503

The attached Mutual Aid Plan was developed jointly between the Health and Fire Departments and the contracting private ambulance companies. The attached letters from each of the four ambulance companies, American Medical Response, Care Ambulance Service, Schaefer Ambulance Service, and West/Med McCormick Ambulance, show consensus to this plan.

*To improve health
through leadership,
service and education*

In further support, the Los Angeles Chapter of the California Fire Chiefs Association has endorsed the concept of the Mutual Aid Plan. We anticipate that this plan may become a template for mutual aid plans in other areas.

The Mutual Aid Plan language and operations are consistent with the format of FIRESCOPE, the basis of California's fire mutual aid. Key elements of the plan include the deployment of private ambulances without depletion of the everyday operational requirements in each Exclusive Operating Area (EOA); the use of the LACoFD as the Fire Operational Area Coordinator (FOAC) for ambulance deployment for



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Each Supervisor
May 23, 2006
Page 2

the entire County during large multiple casualty incidents; and the inclusion of ambulance deployment to respond to incidents outside of the County.

We are confident that this Mutual Aid Plan will be a great benefit to the citizens of the County by ensuring rapid and organized deployment of ambulances to any major disaster both locally and to regions throughout the State.

With the completion of this Plan and agreement by all proposed contractors, the Departments are moving forward to implement the new 9-1-1 emergency ambulance transportation contracts on May 31, 2006 at 8:00 a.m. If you have any questions, please contact us.

CM:PMF:cc

Attachments

- c: Director and Chief Medical Officer
Chief Administrative Officer
Executive Officer, Board of Supervisors
County Counsel
Each EOA Contractor



May 5, 2006

Carol Meyer
Director
Los Angeles County EMS Agency
5555 Ferguson Dr., Suite 220
Commerce, CA 90022

Dear Mrs. Meyer:

On March 14, 2006, your Board approved the Emergency Ambulance Transportation Agreements between our company and the Department of Health Services (DHS). This approval was subject to the contractor's agreement to a Mutual Aid Plan to be jointly developed by the DHS Emergency Medical Services (EMS) Agency and the Fire Department. This letter is in follow up to the development of the Mutual Aid Plan.

Two of American Medical Response's Directors, Scott White and Dave Austin, have actively participated with the EMS Agency and Fire Department in the development of the County-wide mutual plan. We agree with the plan as written and look forward to the full implementation. The plan presented to you by DHS and Fire Department enhances the coordinated ambulance response to multiple casualty incidents and disasters. We fully support the plan and will follow the related policies and procedures.

If you have any questions, please contact Jim Doty at 951-782-5294.

Sincerely,

Randy Skomsvold
Senior Vice President
West Region
American Medical Response

cc: P. Michael Freeman
Fire Chief, Los Angeles County Fire District



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Since

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Medical

Transportation

Specialist

Carol Meyer
Director
Los Angeles County EMS Agency
5555 Ferguson Dr., Suite 220
Commerce, CA 90022

Dear Mrs. Meyer:

On March 14, 2006, the Los Angeles County Board of Supervisors approved the Emergency Ambulance Transportation Agreements between our company and the Department of Health Services (DHS).


Their approval was subject to our agreement to a Mutual Aid Plan to be jointly developed by the Emergency Medical Services (EMS) Agency and the Fire Department. This letter is in follow up to the development of the Mutual Aid Plan.

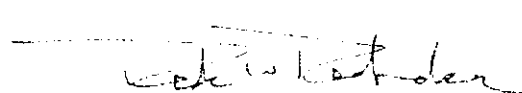
Our company has actively participated with the EMS Agency and Fire Department in the development of the County-wide mutual plan. We agree with the plan as written and look forward to the full implementation.

The plan presented to you by the EMS Agency and Fire Department enhances the coordinated ambulance response to multiple casualty incidents and disasters. We fully support the plan and believe that it will be used by other California EMS agencies as a template to create their own mutual aid plans.

Should you have questions for us regarding this matter, please do not hesitate to contact us.

Sincerely,


Dan Richardson - Co-CEO


Rick Richardson - Co-CEO

C: Fire Chief, Los Angeles County Fire District

*"Large enough to serve you, small enough to **CARE**"*

714-288-3800

888-270-7750

FAX:

714-288-3889

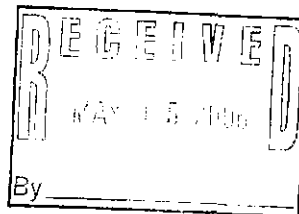
HEADQUARTERS

1517 W. Braden Court

Orange,

California

92868



May 5, 2006

Carol Meyer
Director
Los Angeles County EMS Agency
5555 Ferguson Dr., Suite 220
Commerce, CA 90022

Dear Mrs. Meyer:

On March 14, 2006, the Board approved the Emergency Ambulance Transportation Agreements between our company and the Department of Health Services (DHS). This approval was subject to the contractor's agreement to a Mutual Aid Plan to be jointly developed by DHS Emergency Medical Services (EMS) Agency and the Los Angeles County Fire Department. This letter is in follow up to the development of the Mutual Aid Plan.

Our company has actively participated with the EMS Agency and the Fire Department in the development of the countywide mutual aid plan. We agree with the plan as written and look forward to the full implementation. The plan presented to you by DHS and the Fire Department enhances the coordinated ambulance response to multiple casualty incidents and disasters. We fully support the plan and will follow the related policies and procedures.

If you have any questions, please contact me at 323-468-1620.

Sincerely,


Jim McNeal
President
Schaefer Ambulance Service, Inc.

C: Fire Chief, Los Angeles County Fire District



Carol Meyer
Director
Los Angeles County EMS Agency
5555 Ferguson Dr., Suite 220
Commerce, CA 90022

Dear Mrs. Meyer:

On March 14, 2006, your Board approved the Emergency Ambulance Transportation Agreements between our company and the Department of Health Services (DHS). This approval was subject to the contractor's agreement to a Mutual Aid Plan to be jointly developed by the DHS's Emergency Medical Services (EMS) Agency and the Fire Department. This letter is in follow up to the development of the Mutual Aid Plan.

Our company has actively participated with the EMS Agency and Fire Department in the development of the County-wide mutual plan. We agree with the plan as written and look forward to the full implementation. The plan presented to you by DHS and Fire Department enhances the coordinated ambulance response to multiple casualty incidents and disasters. We fully support the plan and will follow the related policies and procedures.

If you have any questions, please contact Tom Millsap at 714-356-4519, or Joe Chidley at 562-254-2548. Thank you for your time.

Sincerely,

Thomas A Millsap, CEO

C: Fire Chief, Los Angeles County Fire District

5462 2nd Street
Irwindale, CA 91708
888.331.1420 Ph
626.338.3135 Fax
www.westmedambulance.com

COUNTY OF LOS ANGELES FIRE DEPARTMENT
FIRE OPERATIONAL AREA COORDINATOR
AMBULANCE MUTUAL AID PLAN

GOAL

To develop a plan for ambulances and patient transportation within Los Angeles County (LA) that will be scalable with the capability to transport the patients generated from a typical multi casualty incident (MCI) to the numbers of patients generated from a terrorist event or a natural disaster.

PRINCIPLES

1. LA County Fire Department (Fire) and the EMS Agency shall develop an ambulance resource plan that addresses notification, ordering, and coordinating ambulances for multi casualty incidents within Fire's jurisdiction and within other LA County 9-1-1 provider's jurisdictions.
2. The plan will address the coordination of requests for both private and public agency ambulances that result from a single MCI event to multiple or wide-spread events.
3. The plan will address requests for ambulances made by LA County to the OES Mutual Aid System.
4. The plan will address requests for ambulances received by LA County from the OES Mutual Aid System.
5. The coordination of ambulances needs to be based on a battle-tested model that incorporates:
 - a. An emphasis on the maximum number of ambulances provided in the shortest amount of time.
 - b. A single point ordering system.
 - c. A streamlined communication flow to the incident commander.
 - d. A coordination center that is staffed around the clock with an appropriate *number of personnel to handle any expansion of the MCI or multiple MCI's.*
 - e. Continuous coordination throughout the incident.
 - f. The use of common FireScope terminology and methodology whenever possible.
 - g. The coordination of both public and private ambulance providers.
 - h. The coordination of Fire and Medical & Health OES Mutual Aid processes.

COUNTY OF LOS ANGELES FIRE DEPARTMENT
FIRE OPERATIONAL AREA COORDINATOR
AMBULANCE MUTUAL AID PLAN

6. The plan will ensure adequate County-wide ambulance service during an MCI.
7. The plan will provide for the ability to maintain the status of ambulance availability in the LA County.

AMBULANCE COORDINATION PLAN

Definitions

1. Ambulance Strike Team (AST) – Pre-established set of 5 ambulances and 1 supervisor which meets the guidelines established by the State EMS Authority.
2. Exclusive Operating Area (EOA) Provider – Private Ambulance Company that is contracted with the Department of Health Services to provide emergency patient transportation within 7 (seven) established areas (EOA's) of the County where emergency transportation is not provided by the jurisdictional 9-1-1 provider.
3. Fire Operational Area Coordinator (FOAC) – Los Angeles County Fire Department (LACoFD) which is contacted through its Dispatch Center.
4. Medical Alert Center (MAC) – Centralized communication center through which the RDMHC for Region I may be contacted.
5. LA Operational Area – Consists of all political subdivisions within LA County's geographical area that provides coordination and communication between local jurisdictions and OES Regions.
6. OES Regional Entities – Mutual aid regions established by Office of Emergency Services (OES) to manage and coordinate information and resources among operational areas, including the Region I Operational Areas (San Luis Obispo, Santa Barbara, Ventura, Los Angeles, and Orange counties).
7. Regional Disaster Medical and Health Coordinator (RDMHC) – Responsible for all medical and health operations in each of their respective regions. The EMS Agency is the designated RDMHC for Region I and is contacted through the MAC.

Responsibilities

1. The LA County Fire Department will serve as the Fire Operational Area Coordinator (FOAC) and will coordinate ambulances within the LA Operational Area.

COUNTY OF LOS ANGELES FIRE DEPARTMENT
FIRE OPERATIONAL AREA COORDINATOR
AMBULANCE MUTUAL AID PLAN

2. The Medical Alert Center (MAC) will serve as the communication and coordination link for the EMS Agency and the Disaster Medical & Health Coordinator (RDMHC) for Region I. The MAC will also survey their ambulance interfacility transportation fleet (IFT) and survey the remaining back up ambulance providers when notified by the FOAC.
3. The Region I Disaster Medical Health Specialist (RDMHS) for Region I will coordinate ambulance resource requests outside the LA Operational Area.
4. The four Exclusive Operating Area ambulance providers (EOA providers) will report their ambulance availability to the FOAC and will report their designated back up ambulance providers' availability to the FOAC.
5. The four EOA providers shall establish an appropriate deployment plan for each EOA that addresses emergency move-up coverage and emergency staffing procedures to ensure appropriate EOA coverage at all times.

Description

1. The coordination of any requests for ambulances will be based on the following 4-tiered requests:
 - a. Level I: Requests for 10 or less ambulances - normal day to day operations (jurisdictional 9-1-1 provider or EOA provider responsibility).
 - b. Level II: Requests for 11-50 ambulances - LA Operational Area survey (FOAC responsibility).
 - c. Level III: Requests for over 50 ambulances - Regional survey (RDMHC responsibility).
 - d. Level IV: Requests for ambulances from the LA Operational Area to respond to other OES regional entities - LA Operational Area survey (FOAC and RDMHC responsibility).

Operational Plan

1. Level I: Requests for 10 or less ambulances - normal day to day operations (jurisdictional 9-1-1 provider or EOA provider responsibility).
 - a. The jurisdictional 9-1-1 Dispatch Center will fill ambulance requests through their normal ambulance provider deployment plan, their mutual aid or automatic aid agreements.

COUNTY OF LOS ANGELES FIRE DEPARTMENT
FIRE OPERATIONAL AREA COORDINATOR
AMBULANCE MUTUAL AID PLAN

2. Level II: Requests for 11-50 ambulances - LA Operational Area survey (FOAC responsibility).

The FOAC, using the conference call system, will contact the 4 EOA providers, the MAC, and participating fire agencies to survey ambulance availability based on 30 and 60 minute ETA's.

- a. The jurisdictional 9-1-1 provider or EOA provider will have the opportunity to fill the 11-50 ambulance request with ambulances that meet the 30-minute ETA threshold. If the jurisdictional 9-1-1 provider or EOA provider fills the entire ambulance request at this step, the FOAC will continue to survey the other ambulance providers and will maintain the ambulance availability status within the LA Operational Area.
 - b. If the jurisdictional 9-1-1 provider or EOA provider cannot fill the entire request within the 30-minute threshold, the FOAC will coordinate the remainder of the order with other ambulance providers that meet the 30-minute ETA threshold.
 - c. The MAC will survey their IFT fleet and any remaining ambulance providers for ambulance availability that meet the 30 and 60 minute threshold. (MAC may begin making Level III notifications for system exercise and possible incident escalation).
 - d. Participating fire agencies will be surveyed by the FOAC for their ambulance availability that meet the 30 and 60 minute threshold.
 - e. When the entire 30 minute ambulance availability is exhausted in the LA Operational Area, the FOAC will begin filling the remainder of the request with the 60 minute ambulance availability threshold.
 - f. The FOAC will continue to monitor the ambulance availability status in the LA Operational Area throughout the incident's duration and will keep the MAC updated.
3. Level III: Requests for over 50 ambulances - Regional survey (RDMHC responsibility).

The FOAC, using the conference call system, will contact the 4 EOA providers, the MAC, and participating fire agencies to survey their ambulance availability as in Level II.

COUNTY OF LOS ANGELES FIRE DEPARTMENT
FIRE OPERATIONAL AREA COORDINATOR
AMBULANCE MUTUAL AID PLAN

In addition, the RDMHC for Region I will be responsible for contacting the other OES regional entities for their ambulance resource availability for immediate and planned needs based on 1 hour and 4 hour ETA thresholds.

- a. The FOAC will continue to fill the 51-plus ambulance request from within the LA Operational Area as in Level II. If the LA Operational Area fills the entire ambulance request at this step, the RDMHC will continue to survey the other OES regional entities for their ambulance resource availability.
 - b. If the LA Operational Area cannot fill the ambulance request for immediate and planned needs, the RDMHC will coordinate the remainder of the order with other OES regional ambulance providers based on the 1 hour and 4 hour thresholds.
 - c. The MAC will keep the FOAC updated with the ambulances responding from other OES regional entities.
 - d. The FOAC will continue to maintain Level II coordination and keep the MAC updated with the LA Operational Area ambulance availability status.
 - e. The FOAC and the MAC will provide agency representatives to each other's Emergency Coordination Center when requested.
4. Level IV: Requests for ambulances from the LA Operational Area to respond to other OES regional entities as an immediate need or a planned need - LA Operational Area survey (FOAC and RDMHC responsibility).
- a. When the RDMHC receives a request for ambulances from another OES regional entity, the RDMHC (through MAC) will notify the FOAC.
 - b. The FOAC will initiate the conference call system and with MAC, survey the ambulance providers within the LA County Operational Area based on an immediate need (Level II request) or a planned need (AST request).
 - c. The FOAC and the MAC will coordinate the request. The RDMHC will advise the requesting OES regional entity of the ambulances or AST's that are responding out of county to the incident.
 - d. The FOAC will maintain the same ambulance availability status in the LA Operational Area at this level as it does in Level II and Level III.
 - e. When LA Operational Area ambulances are responding out of county for a planned need, the ambulances should respond in strike team configuration (5

COUNTY OF LOS ANGELES FIRE DEPARTMENT
FIRE OPERATIONAL AREA COORDINATOR
AMBULANCE MUTUAL AID PLAN

ambulances and a leader).

Conclusion and return to normal ambulance availability status

1. The FOAC will keep the MAC and ambulance providers updated when MCI's in the LA Operational Area have concluded and the ambulance availability status is normal.
2. The MAC will keep the FOAC and ambulance providers updated with the status of out of county ambulances and their return to the LA Operational Area.

LAEMS/LACoFD
5/23/06